



# Long Beach Fire Department

... more than fighting fires

## FIRE PREVENTION PLAN CHECK APPLICATION

OFFICE  
USE  
ONLY

Project Number \_\_\_\_\_

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### TYPE OF PLAN

**PLEASE SELECT ONLY ONE**

- ☐ Bldg/New Construction **Occupancy** \_\_\_\_\_  
CLASS
- ☐ Sprinkler/New Construction \_\_\_\_\_  
NUMBER **Heads**
- ☐ Fire Alarm ☐ NEW ☐ T.I. \_\_\_\_\_  
NUMBER **Devices**
- ☐ Fire Suppression System \_\_\_\_\_  
NUMBER **Nozzles**
- ☐ Above Ground Tanks \_\_\_\_\_  
NUMBER **Tanks**
- ☐ **OTHER**

**Date of Application** \_\_\_\_\_

- ☐ Bldg/Tenant Improvement **Occupancy** \_\_\_\_\_  
CLASS
- ☐ Sprinkler/Tenant Improvement \_\_\_\_\_  
NUMBER **Heads**
- ☐ Fire Hydrant/Fire Access
- ☐ Spray Booth \_\_\_\_\_  
NUMBER
- ☐ Underground Tanks \_\_\_\_\_  
NUMBER **Tanks**
- ☐ Vapor Recovery System

**PLEASE PRINT ALL INFORMATION LISTED BELOW MUST BE FILLED OUT COMPLETELY AND SIGNED\***

PROJECT NAME			
PROJECT ADDRESS			
DESCRIPTION OF WORK			
COMPANY NAME	CONTACT PERSON	PHONE	
ADDRESS	CITY	STATE	ZIP
STATE LICENCE	CLASS	EXPIRATION DATE	
CITY BUSINESS LICENSE NUMBER	EXPIRATION DATE		

**\* All plans are required to include previous and proposed building use, occupancy classification – per UBC, square footage, type of construction, and information regarding whether or not building is sprinklered.**

**ANY PLANS SUBMITTED WITHOUT THIS INFORMATION WILL BE DELAYED OR RETURNED**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Plans Submitted by \_\_\_\_\_  
Plan Review Fees \_\_\_\_\_  
Plan Review Checked by \_\_\_\_\_

**FIRE PREVENTION OFFICE USE ONLY**

Date \_\_\_\_\_